F ENT COOPERATION TREA

From the INTERNATIONAL BUREAU

PCT

NOTIFICATION CONCERNING
AMENDMENTS OF THE CLAIMS

(PCT Rule 62 and
Administrative Instructions, Section 417)

To:

Assistant Commissioner for Patents
United States Patent and Trademark
Office
Box PCT
Washington, D.C.20231
ETATS-UNIS D'AMERIQUE

in its capacity as International Preliminary Examining Authority

Date of mailing (day/month/year)	
08 September 2000 (08.09.00)	
International application No.	International filing date (day/month/year)
PCT/IL99/00710	30 December 1999 (30.12.99)
Applicant	
DEXCEL LTD. et al	

The International Bureau hereby informs the International Preliminary Examining Authority that no amendments under Article 19 have been received by the International Bureau (Administrative Instructions, Section 417).

The International Bureau of WIPO
34, chemin des Colombettes
1211 Geneva 20, Switzerland

Facsimile No. (41-22) 740.14.35

Authorized officer

C. Cupello

Telephone No. (41-22) 338.83.38

PA. ENT COOPERATION TREA.

From the INTERNATIONAL BUREAU

PCT

NOTIFICATION OF ELECTION

(PCT Rule 61.2)

To:

Assistant Commissioner for Patents
United States Patent and Trademark Office
Box PCT
Washington, D.C.20231
ETATS-UNIS D'AMERIQUE

in its capacity as elected Office

Date of mailing (day/month/year) 08 September 2000 (08.09.00)	
International application No. PCT/IL99/00710	**Applicant's or agent's file reference** 951/28
International filing date (day/month/year) 30 December 1999 (30.12.99)	**Priority date** (day/month/year) 30 December 1998 (30.12.98)
Applicant DOMB, Abraham, J.	

1. The designated Office is hereby notified of its election made:

[X] in the demand filed with the International Preliminary Examining Authority on:

25 July 2000 (25.07.00)

[] in a notice effecting later election filed with the International Bureau on:

2. The election [X] was

[] was not

made before the expiration of 19 months from the priority date or, where Rule 32 applies, within the time limit under Rule 32.2(b).

The International Bureau of WIPO
34, chemin des Colombettes
1211 Geneva 20, Switzerland

Facsimile No.: (41-22) 740.14.35

Authorized officer

C. Cupello

Telephone No.: (41-22) 338.83.38

F ENT COOPERATION TREA

From the INTERNATIONAL BUREAU

PCT

NOTIFICATION OF THE RECORDING OF A CHANGE

(PCT Rule 92bis.1 and Administrative Instructions, Section 422)

To:

BRASS, Daniel
10 Dizengoff Street
64281 Tel-Aviv
ISRAËL

Date of mailing (day/month/year)
08 September 2000 (08.09.00)

Applicant's or agent's file reference
951/28

IMPORTANT NOTIFICATION

International application No.
PCT/IL99/00710

International filing date (day/month/year)
30 December 1999 (30.12.99)

1. The following indications appeared on record concerning:

[] the applicant [] the inventor [X] the agent [] the common representative

Name and Address
FRIEDMAN, Mark, M.
Beit Samueloff
Haomanim Street 7
67897 Tel-Aviv
Israel

State of Nationality:
State of Residence:
Telephone No.: 972 3 5625553
Facsimile No.: 972 3 5625554
Teleprinter No.:

2. The International Bureau hereby notifies the applicant that the following change has been recorded concerning:

[X] the person [X] the name [X] the address [] the nationality [] the residence

Name and Address
BRASS, Daniel
10 Dizengoff Street
64281 Tel-Aviv
Israel

State of Nationality:
State of Residence:
Telephone No.: 972 3 620 1866
Facsimile No.: 972 3 620 1469
Teleprinter No.:

3. Further observations, if necessary:

4. A copy of this notification has been sent to:

[X] the receiving Office
[] the International Searching Authority
[X] the International Preliminary Examining Authority
[] the designated Offices concerned
[X] the elected Offices concerned
[] other:

The International Bureau of WIPO
34, chemin des Colombettes
1211 Geneva 20, Switzerland

Facsimile No.: (41-22) 740.14.35

Authorized officer
C. Cupello

Telephone No.: (41-22) 338.83.38

PCT

REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only

International Application No. 09/869519 09/869519

International Filing Date

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference *(if desired) (12 characters maximum)* 951/28

Box No. I TITLE OF INVENTION

DISPERSIBLE CONCENTRATE FOR THE DELIVERY OF CYCLOSPORIN

Box No. II APPLICANT

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)*

DEXCEL LTD.
P.O.Box 50
Hadera 38100
Israel

☐ This person is also inventor.

Telephone No.

Facsimile No.

Teleprinter No.

State *(that is, country)* of nationality: IL

State *(that is, country)* of residence: IL

This person is applicant for the purposes of: ☐ all designated States ☒ all designated States except the United States of America ☐ the United States of America only ☐ the States indicated in the Supplemental Box

Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)*

DOMB, Abraham J.
16 Migdal Eder St.
Efrat 90436
Israel

This person is:

☐ applicant only

☒ applicant and inventor

☐ inventor only *(If this check-box is marked, do not fill in below.)*

State *(that is,country)* of nationality: IL

State *(that is, country)* of residence: IL

This person is applicant for the purposes of: ☐ all designated States ☐ all designated States except the United States of America ☒ the United States of America only ☐ the States indicated in the Supplemental Box

☐ Further applicants and/or (further) inventors are indicated on a continuation sheet.

Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: ☒ agent ☐ common representative

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)*

FRIEDMAN, Mark M.
c/o CASTORINA, Anthony
2001 Jefferson Davis Highway, Suite 207
Arlington, Virginia 22202
U.S.

Telephone No.

Facsimile No.

Teleprinter No.

☐ **Adress for correspondence:** Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

Box No.V DESIGNATION OF STATES

The following designations are hereby made under Rule 4.9(a) *(mark the applicable check-boxes; at least one must be marked)*:

Regional Patent

- ☒ AP **ARIPO Patent:** GH Ghana, GM Gambia, KE Kenya, LS Lesotho, MW Malawi, SD Sudan, SL Sierra Leone, SZ Swaziland, UG Uganda, ZW Zimbabwe, and any other State which is a Contracting State of the Harare Protocol and of the PCT
- ☒ EA **Eurasian Patent:** AM Armenia, AZ Azerbaijan, BY Belarus, KG Kyrgyzstan, KZ Kazakhstan, MD Republic of Moldova, RU Russian Federation, TJ Tajikistan, TM Turkmenistan, and any other State which is a Contracting State of the Eurasian Patent Convention and of the PCT
- ☒ EP **European Patent:** AT Austria, BE Belgium, CH and LI Switzerland and Liechtenstein, CY Cyprus, DE Germany, DK Denmark, ES Spain, FI Finland, FR France, GB United Kingdom, GR Greece, IE Ireland, IT Italy, LU Luxembourg, MC Monaco, NL Netherlands, PT Portugal, SE Sweden, and any other State which is a Contracting State of the European Patent Convention and of the PCT
- ☒ OA **OAPI Patent:** BF Burkina Faso, BJ Benin, CF Central African Republic, CG Congo, CI Côte d'Ivoire, CM Cameroon, GA Gabon, GN Guinea, GW Guinea-Bissau, ML Mali, MR Mauritania, NE Niger, SN Senegal, TD Chad, TG Togo, and any other State which is a member State of OAPI and a Contracting State of the PCT *(if other kind of protection or treatment desired, specify on dotted line)*

National Patent *(if other kind of protection or treatment desired, specify on dotted line)*:

- ☒ AE United Arab Emirates
- ☒ AL Albania
- ☒ AM Armenia
- ☒ AT Austria
- ☒ AU Australia
- ☒ AZ Azerbaijan
- ☒ BA Bosnia and Herzegovina
- ☒ BB Barbados
- ☒ BG Bulgaria
- ☒ BR Brazil
- ☒ BY Belarus
- ☒ CA Canada
- ☒ CH and LI Switzerland and Liechtenstein
- ☒ CN China
- ☒ CU Cuba
- ☒ CZ Czech Republic
- ☒ DE Germany
- ☒ DK Denmark
- ☒ EE Estonia
- ☒ ES Spain
- ☒ FI Finland
- ☒ GB United Kingdom
- ☒ GD Grenada
- ☒ GE Georgia
- ☒ GH Ghana
- ☒ GM Gambia
- ☒ HR Croatia
- ☒ HU Hungary
- ☒ ID Indonesia
- ☒ IL Israel
- ☒ IN India
- ☒ IS Iceland
- ☒ JP Japan
- ☒ KE Kenya
- ☒ KG Kyrgyzstan
- ☒ KP Democratic People's Republic of Korea
- ☒ KR Republic of Korea
- ☒ KZ Kazakhstan
- ☒ LC Saint Lucia
- ☒ LK Sri Lanka
- ☒ LR Liberia
- ☒ LS Lesotho
- ☒ LT Lithuania
- ☒ LU Luxembourg
- ☒ LV Latvia
- ☒ MD Republic of Moldova
- ☒ MG Madagascar
- ☒ MK The former Yugoslav Republic of Macedonia
- ☒ MN Mongolia
- ☒ MW Malawi
- ☒ MX Mexico
- ☒ NO Norway
- ☒ NZ New Zealand
- ☒ PL Poland
- ☒ PT Portugal
- ☒ RO Romania
- ☒ RU Russian Federation
- ☒ SD Sudan
- ☒ SE Sweden
- ☒ SG Singapore
- ☒ SI Slovenia
- ☒ SK Slovakia
- ☒ SL Sierra Leone
- ☒ TJ Tajikistan
- ☒ TM Turkmenistan
- ☒ TR Turkey
- ☒ TT Trinidad and Tobago
- ☒ UA Ukraine
- ☒ UG Uganda
- ☒ US United States of America
- ☒ UZ Uzbekistan
- ☒ VN Viet Nam
- ☒ YU Yugoslavia
- ☒ ZA South Africa
- ☒ ZW Zimbabwe

Check-boxes reserved for designating States which have become party to the PCT after issuance of this sheet:

- ☐
- ☐

Precautionary Designation Statement: In addition to the designations made above, the applicant also makes under Rule 4.9(b) all other designations which would be permitted under the PCT except any designation(s) indicated in the Supplemental Box as being excluded from the scope of this statement. The applicant declares that those additional designations are subject to confirmation and that any designation which is not confirmed before the expiration of 15 months from the priority date is to be regarded as withdrawn by the applicant at the expiration of that time limit. *(Confirmation of a designation consists of the filing of a notice specifying that designation and the payment of the designation and confirmation fees. Confirmation must reach the receiving Office within the 15-month time limit.)*

Box No. VI PRIORITY CLAIM ☐ Further priority claims are indicated in the Supplemental Box.

Filing date of earlier application (day/month/year)	Number of earlier application	Where earlier application is: national application: country	regional application:* regional Office	international application: receiving Office
item (1) 30 DEC 98 (30-12-98)	09/223378	US		
item (2)				
item (3)				

☐ The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) *(only if the earlier application was filed with the Office which for the purposes of the present international application is the receiving Office)* identified above as item(s): _____

* *Where the earlier application is an ARIPO application, it is mandatory to indicate in the Supplemental Box at least one country party to the Paris Convention for the Protection of Industrial Property for which that earlier application was filed (Rule 4.10(b)(ii)). See Supplemental Box.*

Box No. VII INTERNATIONAL SEARCHING AUTHORITY

Choice of International Searching Authority (ISA) *(if two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used)*: ISA /

Request to use results of earlier search; reference to that search *(if an earlier search has been carried out by or requested from the International Searching Authority)*:

Date *(day/month/year)* Number Country *(or regional Office)*

Box No. VIII CHECK LIST; LANGUAGE OF FILING

This international application contains the following **number of sheets**:

request	: 3
description (excluding sequence listing part)	: 35
claims	: 3
abstract	: 1
drawings	: 3
sequence listing part of description	:
Total number of sheets	: 45

This international application is **accompanied by** the item(s) marked below:

1. ☒ fee calculation sheet
2. ☐ separate signed power of attorney
3. ☐ copy of general power of attorney; reference number, if any:
4. ☐ statement explaining lack of signature
5. ☐ priority document(s) identified in Box No. VI as item(s):
6. ☐ translation of international application into (language):
7. ☐ separate indications concerning deposited microorganism or other biological material
8. ☐ nucleotide and/or amino acid sequence listing in computer readable form
9. ☐ other *(specify)*:

Figure of the drawings which should accompany the abstract:

Language of filing of the international application: ENGLISH

Box No. IX SIGNATURE OF APPLICANT OR AGENT

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).

Mark M. Friedman, agent

For receiving Office use only

1. Date of actual receipt of the purported international application:
2. Drawings: ☐ received: ☐ not received:
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:
4. Date of timely receipt of the required corrections under PCT Article 11(2):
5. International Searching Authority (if two or more are competent): ISA /
6. ☐ Transmittal of search copy delayed until search fee is paid.

For International Bureau use only

Date of receipt of the record copy by the International Bureau:

This sheet is not part of and does not count as a sheet of the international application.

PCT

FEE CALCULATION SHEET
Annex to the Request

For receiving Office use only

International applicati n No.

Date stamp of the receiving Office

Applicant's or agent's file reference 951/28

Applicant
Dexcel Ltd.

CALCULATION OF PRESCRIBED FEES

1. TRANSMITTAL FEE NIS 426 | T

2. SEARCH FEE USD 450 | S

International search to be carried out by US

(If two or more International Searching Authorities are competent in relation to the international application, indicate the name of the Authority which is chosen to carry out the international search.)

3. INTERNATIONAL FEE

Basic Fee

The international application contains 45 sheets.

first 30 sheets USD 455 | b1

15 remaining sheets x 10 additional amount = USD 150 | b2

Add amounts entered at b1 and b2 and enter total at B USD 605 | B

Designation Fees

The international application contains all designations.

10 number of designation fees payable *(maximum 10)* x 105 amount of designation fee = USD 1050 | D

Add amounts entered at B and D and enter total at I USD 1655 | I

(Applicants from certain States are entitled to a reduction of 75% of the international fee. Where the applicant is (or all applicants are) so entitled, the total to be entered at I is 25% of the sum of the amounts entered at B and D.)

4. FEE FOR PRIORITY DOCUMENT *(if applicable)* | P

5. TOTAL FEES PAYABLE NIS 426 USD 2105 | TOTAL

Add amounts entered at T, S, I and P, and enter total in the TOTAL box

[X] The designation fees are not paid at this time.

MODE OF PAYMENT

- [] authorization to charge deposit account (see below)
- [] bank draft
- [] coupons
- [] cheque
- [X] cash
- [] other *(specify)*:
- [] postal money order
- [] revenue stamps

DEPOSIT ACCOUNT AUTHORIZATION *(this mode of payment may not be available at all receiving Offices)*

The RO/ _____

- [] is hereby authorized to charge the total fees indicated above to my deposit account.
- [] *(this check-box may be marked only if the conditions for deposit accounts of the receiving Office so permit)* is hereby authorized to charge any deficiency or credit any overpayment in the total fees indicated above to my deposit account.
- [] is hereby authorized to charge the fee for preparation and transmittal of the priority document to the International Bureau of WIPO to my deposit account.

Deposit Account No. _____ Date *(day/month/year)* _____ Signature _____